WakeMed Additional Application Requirements Form
(Child Life Internship Placement)

Applicant Name: ____________________________________________
Name of College/University: __________________________________

Please answer the following four questions:

1. What do you feel is the most important aspect of a child life specialists’ job?
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

2. Please share with us what you think are some rewarding and challenging aspects of working with critically ill children and their families.
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

3. Please share with us the goals you have for your internship placement.
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

4. How did you learn about the Child Life Program at WakeMed and why do you want to complete your internship training with our program?
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
Have you ever been dismissed or forced to resign from any job held?
Yes____ No_____ Explain: ________________________________________________

Have you ever been convicted of a misdemeanor or felony? (Please include major traffic violations) Note: A conviction does not necessarily bar you from internship.
Yes____ No____ Explain: ________________________________________________

May we contact your present and past employers for reference? Yes ____ No ____

A complete application packet should contain the following materials:

☐ Completed and signed Common Child Life Internship Application

☐ Completed WakeMed Additional Application Requirements Form

☐ College or university transcripts from all schools attended (student copy is acceptable)

☐ Two letters of recommendation

☐ Current Resume

☐ A copy of the university’s child life department’s academic requirements for this placement, including the contact information of your university supervisor for the placement

All application materials required must be completed and postmarked by the appropriate deadline date, in order to be considered for the placement.

Application deadlines are as follows:

<table>
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<tr>
<th>Semester</th>
<th>Deadline</th>
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<tbody>
<tr>
<td>January / Spring</td>
<td>September 5th</td>
</tr>
<tr>
<td>May / Summer</td>
<td>January 5th</td>
</tr>
<tr>
<td>August / Fall</td>
<td>March 15th</td>
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</tbody>
</table>

Return completed application and materials to:

Anna Ward, BS, CCLS
Child Life Student Clinical Site Supervisor
WakeMed Health and Hospitals
Children’s Emergency Department
3000 New Bern Avenue
Raleigh, NC 27610
For further information: (919) 350-2883